

08/31/01

RE ISSUE

PTO/SB/50 (4/98)

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REISSUE PATENT APPLICATION TRANSMITTAL

H1000 09/942961
08/31/01

Address to: Assistant Commissioner for Patents Box: Patent Application Washington, DC 20231	<i>Attorney Docket No.</i>	P54428RE
	<i>First Named Inventor</i>	Seung-Cheol Hong et al.
	<i>Original Patent Number</i>	5,944,830
	<i>Original Patent Issue Date (Month/Day/Year)</i>	August 31, 1999
	<i>Express Mail Label No.</i>	

1. APPLICATION FOR REISSUE OF: (check applicable box) Utility Patent Design Patent Plant Patent

APPLICATION ELEMENTS (37 CFR 1.173)	ACCOMPANYING APPLICATION PARTS
1. <input checked="" type="checkbox"/> Fee Transmittal Form (PTO/SB/56) <i>(Submit an original, and a duplicate for fee processing)</i> 2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification and Claims in double column copy of patent <i>(amended, if appropriate)</i> 4. <input checked="" type="checkbox"/> Drawing(s) <i>(proposed amendments, if appropriate)</i> 5. <input checked="" type="checkbox"/> Reissue Oath/Declaration (not executed) <i>(37 C.F.R. §1.175)(PTO/SB/51 or 52)</i> 6. <input type="checkbox"/> Original U.S. Patent currently assigned? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If Yes, check applicable box(es))</i> <input checked="" type="checkbox"/> Written Consent of all Assignees <i>(PTO/SB/53)</i> -combined in Declaration <input checked="" type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney <i>(PTO/SB/96)</i> -combined in Declaration	7. <input checked="" type="checkbox"/> Statement of status/support for all changes to the claims. See <i>37 CFR 1.173(c). -combined in Declaration</i> 8. <input checked="" type="checkbox"/> Original U.S. patent for surrender <input type="checkbox"/> Ribboned Original Patent Grant <input checked="" type="checkbox"/> Statement of Loss <i>(PTO/SB/55)</i> -combined in Declaration 9. <input type="checkbox"/> Foreign Priority Claim <i>(35 U.S.C. 119) (If applicable)</i> 10. <input type="checkbox"/> Information Disclosure Statement (IDS) PTO-1449 <input type="checkbox"/> Copies of IDS Citations 11. <input type="checkbox"/> English Translation of Reissue Oath/Declaration <i>(If applicable)</i> 12. <input type="checkbox"/> Preliminary Amendment 13. <input checked="" type="checkbox"/> Return Receipt Postcard <i>(MPEP 503)</i> <i>(Should be specifically itemized)</i> 14. <input type="checkbox"/> Other: _____

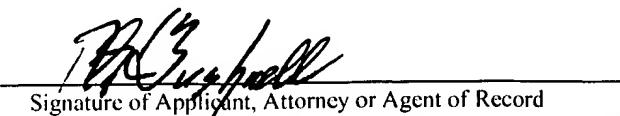
15. CORRESPONDENCE ADDRESS

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Signature			Date
			31 August 2001

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REB/kf

REISSUE APPLICATION FEE TRANSMITTAL FORM				Docket Number (Optional) P54428RE				
Claims as Filed - Part 1								
Claims in Patent	For	Number filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity		
				Rate	Fee		Rate	Fee
(A) 10	Total Claims (37 CFR 1.16(j))	(B) 60	**** 60 - 20 = 40	$\times \$ \underline{\hspace{2cm}} =$		or	$\times \$ \underline{\hspace{2cm}} =$ \$720.00	
(C) 3	Independent Claims (37 CFR 1.16 (i))	(D) 16	* 16 - 3 = 13	$\times \$ \underline{\hspace{2cm}} =$			$\times \$ \underline{\hspace{2cm}} =$ \$1,040.00	
Basic Fee (37 CFR 1.16(h))				\$ <u> </u>		\$710.00		
Total Filing Fee				\$ <u> </u>		OR \$ 2,470.00		
Claims as Filed - Part 2								
	(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
					Rate	Fee		Rate
Total Claims (37 CFR 1.16(j))	***	MINUS	**	*	$\times \$ \underline{\hspace{2cm}} =$		$\times \$ \underline{\hspace{2cm}} =$	
Independent Claims (37 CFR 1.16(i))	***	MINUS	*****	0	$\times \$ \underline{\hspace{2cm}} =$		$\times \$ \underline{\hspace{2cm}} =$	
				Total Additional Fee		\$ <u> </u>	OR \$ <u> </u>	
<p>If the entity in (D) is less than the entity in (C), Write "0" in column 3.</p> <p>If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.</p> <p>After any cancellation of claims.</p> <p>If "A" is greater than 20, use (B-A); if "A" is 20 or less, use (B-20).</p> <p>"Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).</p> <p>Applicant claims small entity status. See 37 CFR 1.27.</p> <p>Please charge Deposit Account No. <u> </u> In the amount of <u> </u>. A duplicate copy of this sheet is enclosed.</p> <p>The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. <u> </u>. A duplicate copy of this sheet is enclosed.</p> <p>The amount of \$ 2,470.00 will be paid later upon filing of an executed Declaration.</p> <p>Payment by credit card. Form PTO-2038 is attached.</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p>								
31 August 2001 Date				 Signature of Applicant, Attorney or Agent of Record <u>Robert E. Bushnell</u> Typed or printed name				